



HAWAII STATE ETHICS COMMISSION ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES AND CONTRIBUTIONS REPORT

(To be filed by organizations, employing organizations
and individuals other than registered lobbyists)

FORM ORG

HAWAII STATE ETHICS COMMISSION
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STATE OF HAWAII
STATE ETHICS COMMISSION

For lobbying reporting period:

☒ January 1 - last day of February

☐ March 1 - April 30

☐ May 1 - December 31

Year of Report 20

Contact person

Catherine Jacoy

Phone

360-790-5729

Organization

Wine Institute

Mailing Address

31 West Road N
Tacoma, WA 98406

PART I. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement period was: \$ 10,471.20

EXPENDITURES

Category	Total Amount	Category	Total Amount
1. Preparation & Distribution of Lobbying Materials	—	7. Entertainment & Events	—
2. Media Advertising	—	8. Food & Beverages	—
3. Telephone and other forms of Telecommunications	—	9. Gifts	—
4. Postage	—	10. Loans	—
5. Compensation Paid to Lobbyists	\$10,471.20	11. Other Disbursements	—
6. Fees (other than to Lobbyists)	—	TOTAL EXPENDITURES	\$10,471.20

COMPENSATION PAID TO LOBBYISTS

List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

Name	Address	Compensation paid
Pmct Hawaii	1 Keahole Place #1102 Honolulu, HI 96825	\$10,471.20

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List in this section all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

- ☒ This section is not applicable
☐ Expenditures incurred in the total sum of \$25 or more per person per day were made for the following persons:

Name & Address	Amount or value

AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List in this section all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

- ☒ This section is not applicable
☐ Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:

Name & Address	Amount or value

PART II. CONTRIBUTIONS RECEIVED

List in this section all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

- ☒ This section is not applicable
☐ Contributions received in the total sum of \$25 or more per person were received from the following persons:

Name & Address	Amount or value

PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

I hereby certify that the statements made above are correct and complete to the best of my knowledge

Cath. Jacoy

(Signature of authorized person)

3/10/13

(Date)

Name of authorized person (type or print)

Catherine Jacoy

Title of authorized person

Western Counsel